NEVADA FINANCIAL DISCLOSURE STATEMENT

(Attach additional sheets if necessary.)



| NAME Brenda J. Erdoes MAILING ADDRESS 2550 Manhattan Dr. CITY, STATE, ZIP <u>Carson City</u> NV 89703 TELEPHONE 175 883-7150 | LENGTH OF RESIDENCE IN NEVADA 27 Years LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE [per NRS 281.571(1)(a)] 27 years in 52 40 E-MAIL erdoes & LCB. state, nv. 45 |
|--|--|
| Public Office Public Office Legislative Counsel \$ 132, \$ \$ | ANNUAL all elected and appointed public officers (no later than Jan. 15 each year) NRS |
| List all general sources of income for you and members of you Employment with Legislative Coun Lease of single family dwelling Interest on IRAs and deposit a | Self Household Member |
| | Self Household Member |

| List each business entity (i.e., organization firm, business, trust joint venture, syndic involved as a trustee, beneficiary of a trust a class of stock or security representing 2 [NRS 281.571, Subsection 1(f)]: | ate, corporation or associatio st, director, officer, owner in w | n) with which you or a membe hole or in part, limited or gener | r of your household is all partner, or holder of |
|--|--|---|--|
| | | | Self Household Member |
| none | | | |
| | | | |
| | | | |
| | | | |
| <u> </u> | | | |
| List specific location and particular use of your household has a legal or beneficial i | nterest; (2) the fair market val | , , , | • |
| state or an adjacent state [NRS 281.571, Sul Specific Locatio | | Particular | Jse |
| 1014 Jeanell Dr. Carson | | | duelling (rental) |
| | | | |
| List the identity of donor and value of ea during the preceding taxable year [excep consanguinity or affinity; and (2) ceremor occasion if the donor does not have a sub [NRS 281.571, Subsection 1(e)]: | ot (1) a gift received from a penial gifts received for a birthdatestantial interest in your legisla | erson who is related to you with y, wedding, anniversary, holida | nin the third degree of ay or other ceremonial |
| None | Donor | | Value of Gift |
| | | | \$ \$ |
| | | | \$ |
| | | | Φ |
| THE INFORMATION I HAVE PROVIDED | HEREIN IS ACCURATE AND | O COMPLETE. | |
| Date: | Signature: | J. hoha | |
| | | DEC N 1AN | EIVED 1 6 2007 |
| D : 10/00/0007 | | D () | |
| Revised 8/23/2005 | NEVADA EINANIOIAI DISCLOSUDE ST | | MISSION ETHICS |